

SCC eFile
(6/10)

**2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

211504113

1.) CORPORATION NAME:

DUE DATE: **3/31/2011**

OM FINANCIAL LIFE INSURANCE COMPANY

SCC ID NO: **F0148694**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

11 S 12TH ST

PO BOX 1463

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1001 FLEET ST 7TH FLOOR

CITY/ST/ZIP: BALTIMORE, MD 21202-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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OFFICER

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DIRECTOR

NAME: JOHN A PHELPS II
TITLE: PRESIDENT
ADDRESS: 1001 FLEET ST 6TH FLOOR
CITY/ST/ZIP/CO: BALTIMORE, MD 21202-

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OFFICER

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DIRECTOR

NAME: ERIC L MARHOUN
TITLE: SVP/GC/SEC
ADDRESS: 1001 FLEET ST 6TH FLOOR
CITY/ST/ZIP/CO: BALTIMORE, MD 21202-

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OFFICER

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DIRECTOR

NAME: VICTOR LUMBY
TITLE: DIR/SVP
ADDRESS: 1001 FLEET ST
CITY/ST/ZIP/CO: BALTIMORE, MD 21202-

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OFFICER

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DIRECTOR

NAME: WILLIAM F ROTHENBACH, III
TITLE: DIRECTOR
ADDRESS: 1001 FLEET ST
6TH FLOOR
CITY/ST/ZIP/CO: BALTIMORE, MD 21202-

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OFFICER

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DIRECTOR

NAME: JOHN ROONEY
TITLE: ASST SECRETARY
ADDRESS: 1001 FLEET ST., 6TH FLOOR
CITY/ST/ZIP/CO: BALTIMORE, MD 21202-

NAME:	BARRY G WARD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO		
ADDRESS:	1001 FLEET ST 7TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	JO ANN GRANT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	JOHN O'SHAUGHNESSEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/Actuary		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	RAJESH KRISHNAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/CIO		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	GEORGE NICHOLSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/Controller		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	GERALD WILSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SVP/CRO		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	M. BRENT TROSTLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/Portfolio Ma		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	EMARIE PAYNE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	AVP		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	KAREN LAM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	AVP		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
NAME:	MARTIN UHL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	AVP/Actuary		
ADDRESS:	1001 FLEET ST., 6TH FLOOR		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21202-		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

<u>/s/ JOHN ROONEY</u>	<u>JOHN ROONEY, ASST</u>	<u>2/21/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		